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## BIB DATA SHEET

CONFIRMATION NO. 6693

|   |   |  |   |   |                               |                                    |
|---|---|--|---|---|-------------------------------|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/549,333  | <b>FILING or 371(c)<br/>DATE</b><br>09/13/2005<br><b>RULE</b>   | <b>CLASS</b><br>030                                      | <b>GROUP ART UNIT</b><br>3742   | <b>ATTORNEY DOCKET<br/>NO.</b><br>127/04736 |                               |                                    |
| <b>APPLICANTS</b><br>Pinchas Shalev, Kfar-Saba, ISRAEL;<br>Zion Azar, Shoham, ISRAEL;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/IL03/00221 03/13/2003<br><b>** FOREIGN APPLICATIONS *****</b><br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>03/16/2007 |   |  |   |   |                               |                                    |
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No<br>Verified and Acknowledged <u>/STEPHEN J RALIS/</u><br>Examiner's Signature  |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR<br/>COUNTRY</b><br>ISRAEL   | <b>SHEETS<br/>DRAWINGS</b><br>4             | <b>TOTAL<br/>CLAIMS</b><br>14 | <b>INDEPENDENT<br/>CLAIMS</b><br>2 |
| <b>ADDRESS</b><br>PRTSI<br>P.O. Box 16446<br>Arlington, VA 22215<br>UNITED STATES   |   |  |   |   |                               |                                    |
| <b>TITLE</b><br>Electric shaver with removable head cutting by heat   |   |  |   |   |                               |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>450   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                               |                                    |